COMBINED DECLARATION & POWER OF ATTORNEY - U.S.A Application

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **METHODS AND COMPOSITIONS FOR TREATMENT OF OCULAR NEOVASCULARIZATION AND NEURAL INJURY** the specification of which

is attached hereto

(•		ation serial No	
		rnational Application N		
	and was ar	mended on	_ (if applicable)	
I hereby state the specification, including			contents of the above lment referred to above	
l acknowledge	the duty to disclo	ose information which	is material to the exan	nination of
this application in acc	ordance with Title	e 37, Code of Federa	l Regulations, §1.56(a).	. I hereby
claim foreign priority be	enefits under 35 U	ISC § 119(a)-(d) or §36	5(b) of any foreign app	olication(s)
for patent or inventor				
designated at least o				
identified below any fo				
application having a fil				
			[X]	
Number	Country	Day/Month/Yr filed)	Priority Not Claimed	
t to our tour a tadea	41 1 	امر عدد المركز عالم (م)	of any United States	nrovision a
•		ier 35 USC \$119 (e)	of any United States	provisiona
application(s) listed be	low.			
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Application No.	Filing Date			
		TIII 05 11 11 101 1	0 1 0300 1 11	

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

60/244,850

(check one)

(X)

November 1, 2000

Application No.

Filing Date

I hereby appoint **CARLOS A. FISHER, Registration No. 36,510** (to whom all communications are to be directed), and the below-named persons (of the same address) individually and collectively my attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith and with the resulting patent, with full power to appoint associate attorneys:

<u>Name</u>	Registration No.
Robert Baran	25,806
Stephen Donovan	33,433
Martin A. Voet	25,208

of the following correspondence address: Allergan, Inc., 2525 Dupont Drive, Irvine, CA. 92612

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

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